LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

Registrations expire as of December 31 unless a renewal is submitted between December 1 and January 31.

Instructions

- Print in ink or type.
- = Complete form and return with \$**40** registration fee to the Board of Ethics, 2415 Qua(L Dr., 3nd, Fleer, Baton Rouge, LA 7080\$ (225)743-8777 or (800) 842-6630.
- Initial registrations must be submitted within 5 days of (1) employment as a
 tobbyist or (2) first action requiring registration. Renewals must be submitted
 between December 1 and January 31.

Le Strytelle Registration Number

FOR OFFICE USE ONLY
Postmark Date: 01/22
PON 2004
J#626392
\$110.00057

1060150

ΖD

70121

Zip

1,	NAME.	Beckstrom Mark W		
		Lest	First	M

2. BUSINESS PHONE 504-842-3228
Area Gods and Phone Number

3. BUSINESS ADDRESS Cohener Clinic Foundation 880 Commerce Road West, Suite 500
Street and No.

New Orleans LA 70123
City State Zip

MAILING ADDRESS

Same Street and No.

City State

4, EMPLOYER Ochaner Clinic Foundation

5. EMPLOYER'S ADDRESS, 1514 Jefferson Street and No.

New Orleans LA State

City

Certification of Accuracy

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information regulfed by the Lobbylst Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.

Male Section
Signature of Lobbyist

ATTACH
2" X 2"
PHOTOGRAPH
HERE
FOR
INITIAL
REGISTRATION
ONLY

.IST BELOV (a) Names of persons, groups, or organization you represent; (c) the type of business each is of whether or not the client or someone else pays you to lob	engaged in or the purpose or fu	the address notion of the	of each such person, group, or e organization or group and;		
Name Ochaner Clinic Foundation					
Address 1514 Jefferson Highway	New Orlean	ıs LA	70123		
Business or purpose Health Care Services, Graduate N	Business or purpose Health Care Services, Graduate Medical Education and Biomedical Research				
Does this person pay you? Y					
If No, who pays you ?					